PTO/SB/22 (08-06)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			Docket Number (Optional) 13077-00140-US		
Application Number			Filed	ed January 24, 2002	
For ELECTROLUMINESCENT ARRANGEMENTS					
Art Unit 1712			Examiner	D. S. Metzmaier	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
One mo	onth (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity F \$60	-ee \$	
	onths (37 CFR 1.17(a)(2))	\$450	\$225	\$	
<u></u>	nonths (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 570.00*	
<u></u>	onths (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
Five me	onths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-2775 *The two month extension was previously paid on 2/5/07. The \$570.00 is the difference from the 3 and the 2 month previously paid.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
×	attorney or agent of record.				
and the second second	attorney or agent under 37 C Registration number if acting t				
/Ashley I. Pezzner/			March 21, 2007		
Signature				Date	
Ashley I. Pezzner Typed or printed name			(302) 658-9141 Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total of	1 forms are sub-	mitted.			